



#### Goals for Serving the Community:

- Align new Health Officer with Mission & Vision by August 2014, so that the Leadership Team and Health Officer are moving forward as a cohesive team.
- Achieve Accreditation by November 2015, to help ensure the Agency is advancing in quality and performance.
- Complete and implement Workforce Development Plan by June 2015, to meet accreditation requirements and help ensure a competent public health workforce.
- Complete and implement a Performance Management and Quality Improvement Plan by March 2015, to meet
  accreditation requirements and to provide a consistent way for the CCHD to analyze where and what changes
  need to be made in order to improve performance and the quality of services provided.
- Develop Communications Plan by June 2016, to increase awareness of the CCHD and better align resources with community partners.
- Complete Gap Analysis for Community Partners by June 2017, to recognize existing, and also identify potential collaborative relationships in the community.
- Support CHIP objectives in an ongoing manner so that the CCHD's priorities remain aligned with those identified in the Community Health Needs Assessment; and agreed upon by the community.



#### **Tracking Progress:**

 Using an online management system called AchieveIT, members of the Leadership Team have been able to give regular updates on progress toward each goal and objective. Below is a summary of that progress and plans for next steps.

### 1. Align new Health Officer with Mission & Vision

In 2014, CCHD underwent a transition in Leadership. The new Health Officer, Tanya Houston, was promoted from her position as a CCHD employee, however she still had a large amount to learn in the new position. This is why this was established as baseline Goal #1. This goal was broken down into Objectives and strategies to help CCHD conceptualize the work. The following bullets are some examples are what has been accomplished as part of this goal.

- a. At the end of every Fiscal Year, CCHD has finished at our below anticipated expenses and at or above anticipated revenue for non-contractual funding streams.
- b. Every staff (excluding those hired within the last 3 months) has attended the mandatory Core At Work training
- c. Regularly scheduled leadership team and all staff meetings are held.
- d. Health officer and staff communicate regularly with the Board of County Commissioners, and the Board of Health.
- e. Health Officer meets regularly with Board of Health, Board of County Commissioners, City Management, etc.
- f. Annual Reports completed and presented to multiple Boards, including the County Commission, City Leadership, Board of Health, and GFPS.

Although this goal and its objectives have been achieved, similar goals may be incorporated into CCHD's next strategic plan.

#### 2. Achieve Accreditation

CCHD has completed the accreditation process and received an action plan. The process was an enlightening experience for CCHD staff, leadership, partners, and executive leadership. Results were not necessarily unexpected, as CCHD had self-identified some gaps in the documentation. Future processes will include completion of the work plan and successfully achieving Accreditation by December 1, 2017. Continuation of accreditation activities will be reflected in CCHD's next strategic plan.

Ongoing work in this area includes the following:

- a. Completion of Data Health Profiles
- b. Deliver Strategic Plan Annual Updates
- c. Include additional data analysis in Annual Report and Community Health Assessment
- d. Strengthen performance management and quality improvement knowledge and application within CCHD
- 3. Complete and implement Workforce Development Plan

CCHD has successfully completed and implemented a Workforce Development Plan. This included some of the following steps:

- a. Assessing and selecting core competency courses for staff
- b. Implementing staff training in alignment with findings of core competency assessment
- c. Fostering a culture of workforce development and learning
  - i. Supporting appropriate training opportunities for current staff
  - ii. Assess current staff to continuously assess
- d. Continuing an active and robust intern and volunteer program within CCHD



The Workforce Development Plan will continue to be reviewed and updated annually, along with assessment of staff needs, but will not be a specified goal in the next strategic plan.

- 4. Complete and implement a Performance Management and Quality Improvement Plan
  - a. Identified lead staff (Trisha Gardner) and team
  - b. Completed QI organizational self-assessment and incorporating finding into QI plan revision
  - c. Quality Improvement Training being conducted by MT Public Health System Improvement Office

Quality Improvement and Performance Management will be ongoing goals in the next strategic plan.

- 5. Develop Communications Plan
  - a. Hired/trained Preparedness & Communications Officer (PaCO)
  - b. Restructured Administration to ensure PaCO's ability to directly work on Communications
  - c. Revamped CCHD website

This goal is not complete and will be carried forward.

- 6. Complete Gap Analysis for Community Partners
  - a. Formal online referral system for services (NOBLE) implemented in Cascade County in 2015 this system
    helps ensure streamlined and formal agreements and processes are utilized for clients. There are 21 users
    for the program.
  - b. Worked with CHCC management to establish a formal agreement regarding the Medical Director signing standing orders.
  - c. Ongoing presentations and outreach to the Medical Community to encourage mutual engagement and communication.
  - d. Public Health Emergency Preparedness (PHEP) annually review Memorandums of Understanding (MOU) to ensure they are accurate and up to date.

This goal is still in progress.

- 7. Support Community Health Improvement Plan (CHIP) objectives
  - a. CCHD Leadership acted as members of the CHIP Leadership Team.
  - b. Produced written documents such as the Community Health Needs Assessment written report and the CHIP written report.
  - c. Consistently attended and participated in Get Fit Great Falls. This group had taken lead for the Healthy Weight component of the CHIP.
  - d. Established a "Live Well" team for CHCC/CCHD.
  - e. Attended and actively supported strategies implemented and introduced by the Access to Care Committee.

The Community Health Improvement Plan objectives will continue to be supported by CCHD.

### **Next Steps**

- a. Train Leadership Team in Outward Mindset concepts to ensure collaborative mindset moving forward
- b. Review public health data trends and conduct SCOT (Strengths, Challenges, Opportunities, Threats) Analysis
- c. Review CCHD Mission, Vision, and Values
- d. Revamp CCHD Strategic Plan ensuring more identifiable metrics and data sources
- e. Update in online system (Achievelt) and formulate plan for internal systematic reporting and data tracking



f. Ensure annual written update delivered to BOH